

Mental Hygiene Priority Outcomes Form
Warren County Community Services (70220)
Plan Year: 2014

Attachments

Consult the LSP Guidelines for additional guidance on completing this form.

2014 Priority Outcomes

Priority Outcome 1

Individuals will have timely access to appropriate housing options.

The need for appropriate housing options exists across all three disability areas.

Information from the latest OPWDD Summary Of Enrollments for Warren and Washington Counties (data as of 12/31/12) indicates that there are 68 individuals with developmental disabilities (34-Warren and 34-Washington) that have requested an out-of-home residence within the next two years. This number continues an upward trend, and is an increase of 12 individuals over the previous year, when 56 (26-Warren and 30-Washington) individuals were requesting an out-of-home residence within the next two years.

Access to available housing options for individuals with mental illness continues to be a need. Access to available resources need to be flexible so that individuals with varying needs can be accommodated. Eligibility restrictions on the "long-stay" supported housing beds related to Psychiatric Center discharges should be eliminated to create greater access, at least in situations where we can show we are consistently bringing out individuals referred to our counties from the Psychiatric Center. We have brought everyone back to the community that CDPC has referred to us, but still lost supported housing resources, despite having a supported housing waitlist of over 20 individuals, who do not meet the "Long-stay" criteria.

There continues to be a need for access to appropriate housing for individuals with chemical dependence and co-occurring disorders as well.

Agencies: OASAS; OMH; OPWDD;

Strategy 1.1

All local housing providers have indicated a willingness to pursue development of residential opportunities as funding is made available. Specific development projects will be incorporated into this plan through presentation to and approval by the subcommittees of the Community Services Board.

Metric:

Each subcommittee of the Community Services Board will review provider proposals for development of residential opportunities at their quarterly meetings.

Agencies: OASAS; OMH; OPWDD;

Strategy 1.2

Supportive housing for individuals with chemical dependence will be developed in Washington County.

Metric:

Providers will explore development of supportive housing in Washington County. This item will be placed on the Chemical Dependency Subcommittee agenda for review and discussion throughout the year.

Agency: OASAS;

Strategy 1.3

The Office of Community Services for Warren and Washington Counties will establish a process in partnership with the DDSO to review quarterly the status of individuals requesting an out-of-home residence.

Metric:

At least four (quarterly) meetings/phone conferences will occur between the Office of Community Services and the DDSO to review the status of the individuals who have requested out-of-home residences.

Agency: OPWDD;

Strategy 1.4

The Office of Community Services will partner with other Counties in the Upper Hudson River Region to advocate for change in the long-stay bed eligibility requirements.

Metric:

"Long-stay" Psychiatric Center requirements will be eliminated as eligibility criteria for certain supported housing options.

Agency: OMH;

Priority Outcome 2

Service options for individuals in crisis will be developed/expanded.

There is currently an over-reliance on the Glens Falls Hospital Emergency Care Center. Additional models of community-based crisis management services designed to reduce the need for emergency room presentation and hospitalization will be developed.

Agencies: OMH; OPWDD;

This outcome has been selected as a top priority.

Strategy 2.1

The Office of Community Services will develop a Home-Based Crisis Intervention program with funds awarded by the NYS Office of Mental Health.

Metric:

The Office of Community Services and the Community Services Boards will issue a Request for Proposals (RFP) and select a provider for a tri-county Home-Based Crisis Intervention Program, to serve Warren, Washington and Saratoga Counties. The program will be operational by September, 2013.

Agency: OMH;

Strategy 2.2

Additional service options for individuals with developmental disabilities in behavioral crisis will continue to be explored and discussed with the OPWDD Developmental Disabilities Regional Office (DDRO).

Metric:

The Office of Community Services will convene meetings together with providers and the DDRO to identify options for appropriate strategies to address behavioral crises.

Agency: OPWDD;

Strategy 2.3

Warren and Washington Counties will participate in pilot implementation of the OPWDD START model.

Metric:

START Model services will be available to individuals with developmental disabilities in Warren and Washington Counties by December 2013.

Agency: OPWDD;

Priority Outcome 3

Optimize provider and system adaptation to the rapidly changing healthcare environment.

The transition to APGs for clinics; the development of the Regional Behavioral Health Organizations (BHOs), Health and Recovery Plans(HARPS)and Developmental Disabilities Support and Care Coordination Organization(DISCOs); along with the implementation of Health Homes are all large-scale systems changes impacting upon local providers and individuals in need of services. Existing fee-for-service Medicaid is transitioning to managed Medicaid and a capitated system of care. This change is happening within the context of a contracting fiscal environment. Previous State funding strategies that garnered Federal participation continue to be deconstructed. Our primary concern is that critical services remain available to individuals in need within our community.

Agencies: OASAS; OMH; OPWDD;

This outcome has been selected as a top priority.

Strategy 3.1

The Office of Community Services and the Community Services Boards will assist providers with advocating to maintain current critical sources of funding, understand shifting sources of funding, and exploring alternative ways to provide and/or fund critical services.

Metric:

This issue will be reviewed quarterly as a standing agenda item for the subcommittees of the Community Services Boards. Any resulting recommendations will be presented to the Community Services Boards and our State agency partners.

Agencies: OASAS; OMH; OPWDD;

Strategy 3.2

The Office of Community Services and the Community Services Board will promote dialogue within the local service system and encourage exploration and discussion of the feasibility of collaborations among contract agencies and other local providers.

Metric:

The Office of Community Services and the Community Services Board will convene meetings with individual agency administrative staff and with agencies collectively to promote this discussion.

Agencies: OASAS; OMH; OPWDD;

Strategy 3.3

The Office of Community Services and the Community Services Board will promote dialogue within the local service system and encourage exploration and discussion of strategies related to ensuring service delivery to the highest need, highest risk populations within our community.

Metric:

The Office of Community Services and the Community Services Board will convene meetings with individual agency administrative staff and with agencies collectively to promote this discussion.

Agencies: OASAS; OMH; OPWDD;

Strategy 3.4

The Office of Community Services and the Community Services Boards will partner with The Sage Graduate Colleges to develop a dashboard monitoring system to examine and monitor the impact of system changes on local needs and the capacity of local services.

Metric:

A dashboard monitoring system will be operational by December 2013.

Agencies: OASAS; OMH; OPWDD;

Priority Outcome 4

Integrated models of care will be developed and implemented.

Categorical funding streams and rigid regulations have in the past prohibited the development of integrated models of care. Within the context of the changing healthcare environment, new opportunities for integration of mental health, chemical dependency, and primary care services will be encouraged and supported, including services for individuals with co-occurring behavioral health diagnoses and/or developmental disabilities.

Agencies: OASAS; OMH; OPWDD;

Strategy 4.1

The Office of Community Services will explore additional opportunities for integration of behavioral health services in primary care settings.

Metric:

This item will be placed on the Mental Health Subcommittee agenda for periodic review throughout the year.

Agencies: OASAS; OMH;

Strategy 4.2

The Dual Recovery Council will convene quarterly meetings to promote discussion and planning for integrated services.

Metric:

The Dual Recovery Council will meet quarterly.

Agencies: OASAS; OMH;

Strategy 4.3

The Office of Community Services will convene meetings with Health Home providers to ensure coordination of behavioral health care services within the Health Home structure, and to develop a process for coordination/communication between the Single Point of Access (SPOA) and the Health Home.

Metric:

Monthly meetings will be held with Health Home providers/partners.

Agencies: OASAS; OMH;

Priority Outcome 5

Individuals will have timely access to appropriate supports and services.

Individuals and families impacted by mental illness, chemical dependency and/or developmental disabilities must have timely access to appropriate supports and services to improve behavioral health outcomes, to improve quality of life, and to control costs of the behavioral healthcare system. This includes a continuum of services and supports, including outpatient clinic, day programming, vocational, family support, peer advocacy and support, respite, developmental disability eligibility determinations, residential services, community-based crisis services and adequate in-patient capacity. Insurance status will not be a barrier to access.

Agencies: OASAS; OMH; OPWDD;

This outcome has been selected as a top priority.

Strategy 5.1

Providers in the community will explore development of appropriate “transition age” services. Young adults with developmental disabilities who are transitioning from school to work need appropriate supports and services to succeed. The same is true for young adults with behavioral healthcare needs.

Metric:

The Office of Community Services and local providers will actively seek out funding opportunities for development of services to this population.

Agencies: OMH; OPWDD;

Strategy 5.2

The Office of Community Services and the Community Services Boards, through the developmental disabilities subcommittee, will examine the community-wide capacity for eligibility determinations and will make recommendations regarding need.

Metric:

This item will be placed on the Developmental Disabilities Subcommittee for periodic discussion and review throughout the year. Recommendations will be developed by the subcommittee.

Agency: OPWDD;

Strategy 5.3

The Office of Community Services and the Community Services Boards, through the developmental disabilities subcommittee, will examine autism service gaps and make recommendations regarding need.

Metric:

This item will be placed on the agenda for the Developmental Disabilities Subcommittee for periodic discussion/review throughout the year. Recommendations will be made by the subcommittee.

Agency: OPWDD;

Strategy 5.4

Providers in the community will work with NYS OPWDD to develop expanded day habilitation opportunities.

Metric:

Providers will actively seek opportunities for development of day habilitation services to meet the level of need in the community.

Agency: OPWDD;

Strategy 5.5

The Developmental Disabilities Subcommittee of the Community Services Board will review the continuum of vocational services within the community and make recommendations regarding need. This will include ongoing integrated employment capacity, sheltered workshop, pre-vocational services and supported employment.

Metric:

This item will be placed on the agenda for the Developmental Disabilities Subcommittee for periodic discussion/review throughout the year. Recommendations will be made by the subcommittee.

Agency: OPWDD;

Strategy 5.6

The Office of Community Services, through the Chemical Dependency Subcommittee, will explore options for expansion of out-patient chemical dependency services to under-served areas of our two counties.

Metric:

This item will be placed on the Chemical Dependency Subcommittee agenda for periodic discussion/review throughout the year.

Agency: OASAS;

Strategy 5.7

The Office of Community Services and the Community Services Boards will explore appropriate strategies to address opioid abuse in the community.

Metric:

The Ad-Hoc Chemical Dependency Subcommittee of the Community Services Board will review this issue and make recommendations, as appropriate.

Agency: OASAS;

Strategy 5.8

The Office of Community Services will explore development of outpatient mental health clinic services within school settings.

Metric:

Outpatient mental health clinic services will be developed within at least two school settings within the plan year.

Agency: OMH;

Priority Outcome 6

Substance abuse and mental health prevention and education services will be expanded.

There is a need to build upon the progress we have seen in recent years in the prevention arena. The Council for Prevention has been very responsive in addressing an increased demand for services. There is an increased recognition of the importance of integrating prevention efforts to address substance abuse and mental health issues.

Agencies: OASAS; OMH;

Strategy 6.1

The Council for Prevention will expand school and community-based behavioral health prevention services.

Metric:

The Office of Community Services and the Council for Prevention will identify and secure additional resources to support expansion of behavioral health prevention services.

Agencies: OASAS; OMH;

Strategy 6.2

The Council for Prevention will provide "cross-system" training and education opportunities.

Metric:

Local mental health provider agencies will be approached regarding utilizing Council for Prevention staff for training/education opportunities. The Office of Community Services will explore funding to support "cross-systems" training.

Agencies: OASAS; OMH;

Strategy 6.3

Mental Health community awareness and prevention strategies (including suicide prevention) will be explored.

Metric:

The Office of Community Services will explore funding to support mental health community awareness and prevention strategies and submit options to the Community Services Board and subcommittees.

Agencies: OASAS; OMH;

Strategy 6.4

The Office of Community Services will explore opportunities for development/enhancement of early intervention strategies.

Metric:

The Children and Youth Subcommittee of the Community Services Board will review this issue and make recommendations to the Office of Community Services and the Community Services Boards.

Agency: OMH;